Form QO/I

Notice of Section 527 Status

OMB No. 1545-1693 (July 2000)

UISUM VANAUUS DINNICS		
Part I General Informatio	n	
1 Name of organization	0	Employer identification number
DR. WATALIE	TOPH GOOK CON	mounty (majeral 94 3369405
2 Mailing address (P.O. Box or nu		number)
GO ASHBURL		
City or town, state, and ZIP cod	Fee C4 94	N 1フ
3 E-mail_address of organization		5 C 0 c/A
	- KU STESS	>r.czy(
4a Name of custodian of records	45 C	ustodian's address
Hager.		1267 FILBURY ST
Sinder5	<	SAN FOUNCISCO CA94109
5a Name of contact person	5b Co	ontact person's address
+ sogue		ושמיו שוישמער בו
Swees.		SAN FRANCISCO CY 84109
6 Business address of organization	n (if different from mailing addr	ress shown above). Number, street, and room or suite number
710		
City or town, state, and ZIP cod	₽	
Part II Purpose		- I HUMANIA I
7 Describe the purpose of the org.	anization	
	CARAMAISA	\
	Zarvetaur @iz	***************************************
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	Entities (see instruction	
8a Name of related entity	8b Relationship	8c Address
		and the state of t
		RECEIVED
		₹ JUL 2 8 2000 8
		\$ JUL 2 8 200 0 ₩
		OGDEN, UT
		<u> </u>
or Consequery Reduction Act Notice	- c-c page 4	Cat. No. 30405V Form 8871 (7.2000)

Roger Sinders	Treasurer CANDIDAGE	JONG 7 FILERIUM CA 94,105
NAMAUR. Berg	CANDIDAGE	SON FRANCISCOCA 94117
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Sign Here

Signature of authorized official